

**NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION  
AIR QUALITY PERMITTING**

**GENERAL PERMIT REGISTRATION FORM**

**STORAGE AND TRANSFER OF SERVICE STATION FUELS USING ONLY STAGE 1 VAPOR  
RECOVERY**

**SECTION A: FACILITY PROFILE**

Facility ID Number \_\_\_\_\_ Facility Name \_\_\_\_\_

**Street Address**

Address Line 1 \_\_\_\_\_  
Address Line 2 \_\_\_\_\_  
Address Line 3 \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Mailing Address** ☐ Check if same as street address above

Address Line 1 \_\_\_\_\_  
Address Line 2 \_\_\_\_\_  
Address Line 3 \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**County**

County Where Facility Is Located \_\_\_\_\_

**Location Description**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Mailing Instructions  
and Information:**

Mail Registration Form & Fee to:  
NJDEP - Air Quality Permitting Program  
401 E. State Street, PO Box 027  
Trenton, New Jersey 08625-0027

Fee Amount: \$250  
Make checks payable to "Treasurer, State of NJ"

For Assistance, Please call:  
(800) 441-0065 within NJ  
(609) 292-6716 outside NJ

**Industry Information**

Primary SIC \_\_\_\_\_  
Secondary SIC \_\_\_\_\_

**Facility Contact**

Contact person (check all applicable boxes)

☐ Owner

☐ Operator

Name _____	Organization _____
Title _____	Organization Type _____
Phone _____	NJ EIN _____
Fax _____	Mailing Address _____
Other _____	Address Line 2 _____
Type _____	Address Line 3 _____
E-mail _____	City _____ State _____ Zip _____

**SECTION B: REASON FOR APPLYING** (Check All That Apply)

☐ New or Existing, Un-permitted Unit(s)

☐ Permitted Unit(s)

Previous Permit and/or Certificate Number(s): \_\_\_\_\_

**Did this facility dispense gasoline prior to June 29, 2003?**

☐ Yes

☐ No

**SECTION C: EQUIPMENT INVENTORY**

Emission Unit NJID #	Facility Designation of Emission Unit
U-	

Equipment NJID #	Tank Contents	Tank Location	Tank Capacity (Gallons)	Installation Date
E-	Gasoline <input type="checkbox"/> Diesel <input type="checkbox"/> Kerosene <input type="checkbox"/>	Above Ground <input type="checkbox"/> Below Ground <input type="checkbox"/>		
E-	Gasoline <input type="checkbox"/> Diesel <input type="checkbox"/> Kerosene <input type="checkbox"/>	Above Ground <input type="checkbox"/> Below Ground <input type="checkbox"/>		
E-	Gasoline <input type="checkbox"/> Diesel <input type="checkbox"/> Kerosene <input type="checkbox"/>	Above Ground <input type="checkbox"/> Below Ground <input type="checkbox"/>		
E-	Gasoline <input type="checkbox"/> Diesel <input type="checkbox"/> Kerosene <input type="checkbox"/>	Above Ground <input type="checkbox"/> Below Ground <input type="checkbox"/>		
E-	Gasoline <input type="checkbox"/> Diesel <input type="checkbox"/> Kerosene <input type="checkbox"/>	Above Ground <input type="checkbox"/> Below Ground <input type="checkbox"/>		

**SECTION D: PERMITTING SCENARIOS**

Registration under this General Permit covers all gasoline tanks and pumps equipped with Stage 1 vapor recovery equipment as described in the General Permit. This General Permit Registration Form covers all equipment related to storage and transfer of service station fuels at Gasoline Dispensing Facilities using only Stage 1 vapor recovery.

An owner or operator should check to see if air pollution control permits are needed prior to the installation and operation of any equipment not described in this permit.

Each facility may possess only one GP-014 at any time. If a facility wants to make a change to a source which has already been registered under GP-014, a new General Permit Registration is required, unless the changed source would remain within the class of sources which qualify for GP-014, and the source would continue to be operated in accordance with the parameters set forth in the option chosen in the Registration.

### **SECTION E: CERTIFICATION**

"I certify under penalty of law that I believe the information provided in this document is true, accurate, and complete. I am aware that there are significant civil and criminal penalties, including the possibility of fine or imprisonment or both, for submitting false, inaccurate or incomplete information."

\_\_\_\_\_  
Name of Individual  
with Direct Knowledge

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

"I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attached documents and, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate and complete. I am aware that there are significant civil and criminal penalties, including the possibility of fine or imprisonment or both, for submitting false, inaccurate or incomplete information."

\_\_\_\_\_  
Name of Responsible Official

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

For Department Use Only

PER# \_\_\_\_\_

Fee \_\_\_\_\_

## **INSTRUCTIONS FOR COMPLETING THE REGISTRATION FORM STORAGE AND TRANSFER OF SERVICE STATION FUELS USING ONLY STAGE 1 VAPOR RECOVERY**

### **SECTION A: FACILITY PROFILE**

**Facility (ID Number & Name)** - Enter the New Jersey air pollution facility identification number (ID) followed by the facility name for which the General Permit is being registered. The ID is a five-digit number assigned by the New Jersey Department of Environmental Protection. Your facility name is the one registered with the New Jersey Secretary of State, under which your facility does business.

**Street Address** - Enter the address of the facility where the equipment to be permitted is physically located.

**Mailing Address** - Enter the facility's mailing address. If it is the same as the facility location, check the box provided.

**Mailing Instructions & Information** - Once the General Permit Registration Form has been completed, it should be mailed along with the appropriate fee(s) to the New Jersey Department of Environmental Protection at the address listed on the front page of the Registration form. The fee is \$250.00 per General Permit Registration Form submitted. Make checks payable to ATreasurer, State of New Jersey.

**County** - Enter the county in which the facility is located (**not the mailing address county**).

**Location Description** - Describe the facility's location if it is difficult to find using the street address. If you have to give a visitor directions to your facility, consider showing them here. (*Example*: "Two miles down the access road that leaves state highway 29 at mile marker 10.")

**Industry Information** - Enter the facility's four-digit primary and secondary (if any) Standard Industrial Classification Codes (SIC) or equivalent. Use the codes registered with the US Department of Labor. You may also refer to the Standard Industrial Classification Manual from the U.S. Office of Management and Budget or equivalent industrial classification code.

**Facility Contact** - Check the box indicating the facility contact person for this General Permit Registration. If the owner and operator are the same, check both boxes. Enter the name, title, phone and fax numbers, other phone numbers and type of number (*Example*: pager, toll free, cell phone), e-mail address, the organization that the contact person works for, the type of organization (federal, local, public, private, state or utility), the New Jersey Employer Identification Number (EIN) and the contact mailing address.

### **SECTION B: REASON FOR APPLYING**

This section of the General Permit Registration Form provides the Department with the reason the General Permit Registration Form is being submitted.

**New or Existing, Un-permitted Unit(s)** - Check this box if this application is being filed for a unit(s) for which no current permit exists.

**Permitted Unit(s)** - Check this box if this application is being filed to supercede an existing permit(s) covering a unit(s). The permit(s) being superceded may be either Pre-Construction Permits or existing General Permits. These existing permits will need to be listed in the Registration.

**Previous Permit or Certificate Number** - List the previous permit(s) that are being superceded.

**Did this facility Dispense gasoline prior to June 29, 2003?** – Check the Yes box if the facility dispensed gasoline prior to June 29, 2003. Check the No box if the facility did not dispense gasoline prior to June 29, 2003.

## **SECTION C: EQUIPMENT INVENTORY**

**Facility Designation of Emission Unit** - Enter the name by which the facility identifies the gasoline dispensing operation. (*Example:* Stage 1 Equipment at Terminal A).

**Emission Unit NJID** - A facility may do either one of the two following:

1- Enter a unique 6 digit identification number (*example:* U-000010) for the storage and transfer of service station fuels equipment group covered by this General Permit. Once a number is used to identify the storage and transfer of service station fuels equipment group or any another piece of equipment at the facility, the same number **cannot** be used to identify any other piece of equipment at the facility. (**Note:** If the 6 digit identification number the facility enters is incorrect or conflicts with any number registered with the Department, then the Department will assign an appropriate number for the equipment);

OR

2- Leave this line blank and the Department will assign an appropriate 6-digit identification number for storage and transfer of service station fuels equipment group covered by this General Permit. The Department will not assign the same two numbers for any piece of equipment registered for the facility.

**Equipment NJID** - see **Emission Unit NJID**

**Tank Contents** - Check the box of the fuel stored in the storage tank (Check only one box)

**Tank Location** - Check the box of the location of the storage tank (Check only one box)

**Tank Capacity** - Enter the maximum capacity (in gallons) for each storage tank to be covered by this General Permit.

**Installation Date** - Enter the date on which the storage tank was installed

## **SECTION D: PERMITTING SCENARIOS**

Registration under this General Permit covers all gasoline tanks and pumps equipped with Stage 1 vapor recovery equipment as described in the General Permit. This General Permit Registration Form covers all equipment related to storage and transfer of service station fuels at Gasoline Dispensing Facilities using only Stage 1 vapor recovery.

An owner or operator should check to see if air pollution control permits are needed prior to the installation and operation of any equipment not described in this permit.

Each facility may possess only one GP-014 at any time. If a facility wants to make a change to a source which has already been registered under GP-014, a new General Permit Registration is required, unless the changed source would remain within the class of sources which qualify for GP-014, and the source would continue to be operated in accordance with the parameters set forth in the option chosen in the Registration.

## **SECTION E: CERTIFICATION**

Print or type the Name and Title of the Individual with Direct Knowledge or Responsible Official. Sign and date the application with an original signature.

**Individual with Direct Knowledge** - Individual listed as the contact person or any person with direct knowledge of and responsibility for the information contained in the General Permit Registration Form. This may or may not be the same person who signs as the Responsible Official defined below.

**Responsible Official** - A facility official responsible for the General Permit Registration. A Responsible Official as defined in N.J.A.C. 7:27-1.4 is as follows:

- For a corporation: a president, secretary, treasurer, or vice-president of the corporation; any other person who performs similar policy or decision making functions for the corporation; or a duly authorized representative responsible for the overall operation of a facility (plant manager, etc.).
- For a partnership: a general partner.
- For a sole proprietorship: the proprietor
- For a government agency: either a principal executive officer or ranking elected official.